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Quality And Safety Reporting Tool

Date of Even	t			Date Submitte	ed.	
Course					Student	or Faculty
Purpose						
care data o and provide and faculty.	r any data that would identify specified in a contraction for process improven	pecific patier nent, with the ror those use	its, faculty, on e overall good ed in the hea	or students will be co al of improving the c alth care facilities wi	ollected. The day	afety concerns. No patient health ata collected is used to identify trenety of the clinical practice of studen udents affiliate and the process is
						ee will make recommendations to ion Record, which is intended for
individual s	tudent performance and remed	iation plans.		·		
Close Error -	ent se Event – any undesirable exp Call/Near Miss – an event, situa - failing to provide care or provi d – dangerous situation that has	ation, or erro	or that took p ng care	olace but was captu	red before reac	
Did this eve	ent actually "reach" the patient? No, it was intercepted by:	Student	Faculty	Other		
Type of Incident Care and Treatment Fall Food and Nutrition HIPAA Violation		Knowle Lab Ev	n Prevention dge Deficit ent tion Error	Se	rofessional con ecurity and Saf ther	
Affected Inc	lividual					
Instructor		Studen	Student			
Patient		Other				

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Narrative of Event
Potential or actual consequences of the error
Nursing action taken to address the issue

Submit report to one of the following locations: HL library, nursing office, nursing lab, or email to the Quality and Safety Committee Chairperson.